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PTO/SB/01 (03-01)

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| | | |
|---------------------------------------------------------------------------------------|--------------------------|-----------------------------------------------------------------------------------------------------------------------|
| DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) | Attorney Docket Number | TRANS 3.0-053 CIP |
| | First Named Inventor | Patrick David Lopath |
| | COMPLETE IF KNOWN | |
| | Application Number | 10/635,170 |
| | Filing Date | August 6, 2003 |
| | Group Art Unit | 3739 |
| <input type="checkbox"/> Declaration Submitted with Initial Filing | OR | <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required) |
| Examiner Name | | P. J. Vrettakos |

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am an original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

BALLOON ALIGNMENT AND COLLAPSING SYSTEM

(Title of the Invention)

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the specification of which

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY) 08/06/2003 as United States Application Number or PCT International Application No. 10/635,170 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? | |
|-------------------------------------------|---------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| | | | | YES | NO |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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PTO/SB/01 (03-01)

DECLARATION — Utility or Design Patent Application

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number 000530

Direct all correspondence to:



Customer Number
or Bar Code Label

000530

OR ☐

Correspondence address below

Name

Address

City

State

ZIP

Country

Telephone

Email

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:



A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any])

Patrick David

Family Name
or Surname

Lopath

Inventor's
Signature

Date

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06902

06905

Country

United States of America

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Harhen

Inventor's
Signature

Date

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02332

Country

United States of America



Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

| DECLARATION | | | | ADDITIONAL INVENTOR(S) Supplemental Sheet | | Page 1 of 1 | |
|--------------------------------------------|--|------------------------------|--|-------------------------------------------------------------------------------|--|--------------------------|--|
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name (first and middle (if any)) | | | | Family Name or Surname | | | |
| Yegor | | | | Sinelnikov | | | |
| Inventor's Signature | | | | Date | | | |
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| Residence: City | | State | | Country | | Citizenship | |
| Mailing Address: | | 126 Liberty Avenue No. 2B | | | | | |
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| City | | State | | Zip | | Country | |
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name (first and middle (if any)) | | | | Family Name or Surname | | | |
| James D. | | | | Savage | | | |
| Inventor's Signature | | | | Date | | | |
| Port Jefferson Station | | NY | | United States of America | | US | |
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| City | | State | | Zip | | Country | |
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name (first and middle (if any)) | | | | Family Name or Surname | | | |
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| Inventor's Signature | | | | Date | | | |
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| City | | State | | Zip | | Country | |
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name (first and middle (if any)) | | | | Family Name or Surname | | | |
| John | | | | Hotmer | | | |
| Inventor's Signature | | | | Date | | | |
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| City | | State | | Zip | | Country | |

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**DECLARATION FOR UTILITY OR
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(37 CFR 1.63)**

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Submitted
with Initial
Filing

OR

☒ Declaration
Submitted after Initial
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(37 CFR 1.16 (e))
required)

Attorney Docket Number

TRANS 3.0-053 CIP

First Named Inventor

Patrick David Lopath

COMPLETE IF KNOWN

Application Number

10/635,170

Filing Date

August 6, 2003

Group Art Unit

3739

Examiner Name

P. J. Vrettakos

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|-------------------------------------------|---------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| | | | | YES | NO |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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POWER OF ATTORNEY: As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number 000530

| | | | |
|-------------------------------|-----------------------------------------------------------------------|--------|----------------------------------------------------------|
| Direct all correspondence to: | <input checked="" type="checkbox"/> Customer Number or Bar Code Label | 000530 | OR <input type="checkbox"/> Correspondence address below |
|-------------------------------|-----------------------------------------------------------------------|--------|----------------------------------------------------------|

Name

Address

City

State

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Country

Telephone

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:



A petition has been filed for this unsigned inventor

Given Name
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Signature

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Harhen

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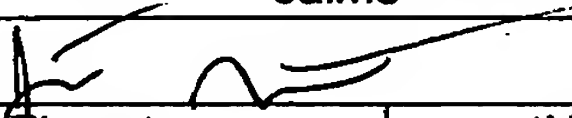
Country
United States of America



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LD-537A

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| DECLARATION | | | | ADDITIONAL INVENTOR(S) Supplemental Sheet | | Page 1 of 1 | |
|-----------------------------------------------------------------------------------------------------------|--|------------------------------|--|-------------------------------------------------------------------------------|--|----------------------------------|--|
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name (first and middle (if any)) | | | | Family Name or Surname | | | |
| Yegor | | | | Sinelnikov | | | |
| Inventor's Signature  | | | | Date 4/20/06 | | | |
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| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
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| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
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